## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 27 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P9400091166 (6)

AARDVARK SAFETY SUPPLY, INC.

Principal Plac	e of Business	Mailing Address	Mailing Address				
11004 LA SALINAS CIR BOCA RATON FL 33428 US			11004 LA SALINAS CIR BOCA RATON FL 33428-1239 IIS				
		•				3. Date Incorporated or Qualified 3a. Date of Last Report 01/31/1996	
2. Principal Place of Business		2a, Mailing Add	2a, Mailing Address			4. FEI Number Applied For	_
21		26				65-0545441 Not Applicab	le
Suite, Apt. #, etc.		Suite, Apt. #	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional	
22		27	· • · · · · · · · · · · · · · · · · · ·			Fee Required	
City & State		City & State	<del></del>			6. Election Campaign Financing \$5.00 May Be	
Zip Country		28				Trust Fund Contribution Added to Fees	_
		Zip	<del> </del> -			8. This corporation has liability for intangible tax under s. 199.032,	
24	9. Name and Address of Curre	[29]	30	<u>'l</u>		Florida Statutes Yes No 10. Name and Address of New Registered Agent	
EEU	***************************************	A Trogration Agont		81	Name	10, Hanto and Address of New Registers Agent	$\dashv$
	DMAN, JOEL H DAL EEDEDAL HIGHWAY SLITTE	: 007D					
4800 N. FEDERAL HIGHWAY SUITE 207D BOCA RATON FL 33431			82	Street A	Address (P.O. Box Number is Not Acceptable)		
ВОС	A RAION EL 3343 I			83			-
				84	City	85 Zip Code	_
				11		FL [ ]	
11, Pursuant t	to the provisions of Sections 607.05	02 and 607, 1508, Flori	da Statutes,	the above	-named c	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered	ď
agent La	rn familiar with, and accept the oblig	ations of, Section 607	.0505, Florid	ia Statutes	ine corpu i.	oration's board or directors. Thereby accept the appointment as registered	
SIGNATURE							
	Signature, typed or printed can diol registered ag		(NOTE: Re		nt signature re	required when reinstating) DATE	
12.		ND DIRECTORS	t) FTC	13.	·····	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	_
THEF	PD CANADA UNDA			1.1 TITLE		☐ Change ☐ Additio	w
NAME	CANADA, LINDA			1.2 NAME			
STREET ADDRESS	11004 LA SALINAS CIR			1.3 STREET	ADDRESS		ı
City-S1-7P	BOCA RATON FL	□ Di	TI ETE	14 CITY - ST	r-ziP		_
TILE		□ <i>\</i>	CLEIL	21 TITLE	į	L_1 Change L_1 Additio	^
NAME				22 NAME			
STREET ADDRESS				2 3 STREET			
CITY-ST-ZIP TITLE			ELETE	2.4 City-S	T-ZIP		
NAME		<b>□</b> 100		3.1 TITLE		L.J. Change L.J. Additio	#T
			3.2 NAME				
STREET ADDRESS				3.3 STREET			
CITY-ST-ZIP TITLE		Пы	ELETE	3.4. CITY - S 4.1 TITLE	T- ZIP	Change Additio	_
NAME		L 121	LLCIL			f"T cusifie T you'do	"
STREET ADORESS				4. 2 NAME	1000000		
				4.3 STREET			
CITY - ST - ZIF TITLE		DI	FLETE	4.4 CITY - ST 5.1 T†TLE	- 4117	Change Additio	_
NAME		Land Di		5.2 NAME		L. Change L. Adulio	"
STREET ADDRESS				5.3 STREET	ADDDECC		
City - S1-2iP							
TITLE	**************************************	DE	LETE	5.4 CITY - \$1 6.1 TITLE	- ZIF	☐ Change ☐ Additio	$\exists$
NAME				6.2 NAME		ביי אטנונט	"
STREET ADDRESS					annaree		
Office RUDNESS			·	6.3 STREET	AUUMESS		- [

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

LINDA L. CANADA